

Pharmaceutical Surgery.

Concluded from last month.

BRUISES.

The color and general appearance of a bruise varies greatly with the part on which it occurs. Where the tissues are firm, as on the forehead or knee, there is not much discoloration and it takes some time to appear; but when the bruise occurs on the limbs or under the eyes, where the skin is loose, the part quickly becomes much discolored, getting blue at first, and finally passing to brown and yellow before at last disappearing. This is caused by the rupture of the tissues beneath the skin, especially the tiny blood-vessels which abound there, and which, by their injury, pour out their blood into the skin and beneath it in the surrounding tissues, thus causing the darkness. Hence it follows that the amount of apparent damage varies with the force of the injury; there may be but little swelling or color; there may be great discoloration, often with blisters containing blood and pus; or, in very severe cases, even mortification of the part.

HEAVY FALLING.—This may produce internal bruises, the most frequent perhaps being concussion of the brain. This may be accompanied by bleeding from the nose or mouth, and is always associated with fainting, insensibility and often vomiting. If any of the abdominal organs—stomach, liver or bowels—be injured, great pain is always caused with faintness, and even sometimes death; injury of the lungs is followed by faintness and internal hemorrhage, and hence the spitting of blood. In these cases rest is the most important point, the head being kept low and bathed with cold water to overcome the faintness. Do not give stimulants unless the patient be absolutely prostrate; if in great pain use a warm lotion of laudanum and water applied on flannel.

TREATMENT.—In case of ordinary bruises little is required; leave a mild bruise quite alone; if it requires some attention a lotion of tinct. hamamelidis and water, 1 to 3, is very useful, or 1 drachm of tinct. arnice to 1 oz. of dilute lead lotion reduces swelling like magic, and prevents discoloration. If there be much pain, and the skin be not broken, an application of equal parts of lin. chlorof., and lin. opii. on spongio-piline is excellent; or if the skin be broken then use the warm laudanum and water lotion, followed by a dressing of boric ointment. In concussion of the brain, besides the treatment mentioned above, lay the patient on a sofa flat, with the head a little raised, applying ice or cold water cloths to the head, and keeping him perfectly quiet or if completely insensible, apply warmth to the body and limbs with the aid of hot water-bottles or warm bricks covered with flannel.

SUNSTROKE.

This effect of heat, properly known as

"heat fever," depends upon congestion of the brain, its symptoms exhibiting themselves as headache, dizziness, sickness and unconsciousness, which follow one after the other. The head is very hot and the face flushed, the temperature being very high, from 105° F. to 110° F. The pulse is very rapid and jerky. The treatment is all in the direction of bringing down the heat. The patient is best removed to the shade and undressed, the head being elevated, then well drenched with cold water, ice being applied to the head and back when procurable. The temperature under the armpit should be constantly taken, and must not be allowed to go below 100° F., as it often comes down fast and too low; if it gets down to 90° or 92° whiskey had best be administered in teaspoonfuls, and all application of cold stopped.

Another effect of extreme heat, wrongly sometimes called "sunstroke," but arising from a different cause to the last, may be recognized by its symptoms. This should more properly be termed "heat exhaustion," and is the consequence of hard labor, such as digging, or prolonged fast walking in extreme heat, the air being sultry and damp. The symptoms are outwardly similar as regards the nausea and dizziness, but the pulse will be found very slow and the breathing slow and interrupted; the temperature under the arms will be found to vary from 98° to 99°. In such a case the treatment must be the reverse of the last. The patient being, however, removed to the shade, must be laid quite flat, and restoratives at once applied in the shape of whiskey or wine; on no account must any cold applications as ice or cold water, be made.

MINOR AILMENTS.

BLEEDING FROM NOSE may be stopped by snuffing tannic acid in powder, or syringing the nose with diluted hazeline (1 in 3). The patient should be kept upright, and cold applications of water or ice be made to the head or back of neck. A good plan is to place the patient's feet in a pan of very hot water.

NEEDLE IN THE FLESH.—The great point is to keep the patient quite still, or the needle will probably work further in. Get a suitable pair of pincers which will "bite" well, and do not attempt to withdraw it with anything else. In case of a fish hook it is best brought right forward through the flesh, so that the pointed end comes out first, otherwise the barb may do serious damage.

ABRASIONS.—If the patient has fallen or in any way scraped the skin from any projecting point, knee, elbow, &c., one of the best applications for the healing is lano-croolin, which is detergent as well as curative. It is best spread on lint and fastened over the part with strips of adhesive plaster, or with a handkerchief or bandage. Lano-croolin is an excellent ointment both for abrasions of this description and for burns and scalds, and can indeed take the place entirely of "ung. zinci" and with advantage. It does not

become rancid, is non-greasy, rapidly absorbed into the skin, and on all accounts is a most effective remedy to prescribe for the many little cuts and wounds brought to be treated by the chemist.

ACCIDENTAL POISONING.

Cases of this kind require active treatment, and must be very prompt, therefore requiring the thought of the pharmacist to the best antidote for the particular poison swallowed. In many cases, however, they do not know what poison it was, or it may be some solid body of an even non-poisonous nature that should be got rid of. In either of these cases an emetic is given, and it is as well to have one always handy in case of its being required. One of the best, perhaps, is half an ounce of vin. ipecae., and of the other common ones, mustard and luke-warm water is most effective, salt and water coming next. After any of these get the patient to drink as much tepid water as possible, and promote sickness in any way that occurs to you. If you can gather what the poison is, give the proper antidote, a few of the most common being:

CARBOLIC ACID, certainly the most frequent. Give an emetic, then saccharated solution of lime and olive or castor oils, plenty of each being administered.

CYANIDES.—**PRUSSIC ACID.**—Place the patient in the fresh air and induce artificial respiration. Internally is given a solution of 12 grains of ferri. sulph. with a drachm of tinct. ferri. perch. in an ounce of water, followed directly by a solution of 24 grains of potas. carb. in water; this will render about 130 drops of B. P. prussic acid insoluble. Give sal volatile and brandy as stimulants.

OPUM OR ITS ALKALOIDS.—Administer an emetic of 10 grains cupri. sulph. in water; put strong ammonia to the nose, and keep the patient walking about in every way possible; 10 minims of liquor strychnie is said to be the antidote for 1½ drachms of liquor morphie or a larger quantity of opium tincture.

NUX VOMICA OR STRYCHNINE.—The muscles are very cramped and drawn, and the face often much contorted. Give an emetic of mustard and water or sulphate of zinc, using chloroform or ether to rub on the muscles to relax them.

ACONITE OR BELLADONNA.—Give emetics of cupri. sulph. (10 grs.), zinci. sulph. (20 grs.), or ipecacuanha wine (½ to 1 oz.)

In other cases it is always best to administer an emetic. Either of those mentioned being generally efficacious.

SPRAINS.

Great care should be taken with patients suffering from sprains; as otherwise if neglected the foundation of some permanent joint diseases is likely to be laid. First, keep the joint at rest until the pain and swelling have gone; if it be in the arms or shoulders the limb should be placed in a sling, if in the legs or feet it is absolutely necessary that the patient should lay up. If asked to treat the sprain directly after it has been caused,